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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/691,995	10/23/2003	Hartmut Schmidt	71044	2448

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MCGLEW & TUTTLE, PC
P.O. BOX 9227
SCARBOROUGH STATION
SCARBOROUGH, NY 10510-9227

EXAMINER	
TOY, ALEX B	

ART UNIT	PAPER NUMBER
3739	

DATE MAILED: 09/15/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary	Application No.	Applicant(s)	
	10/691,995	SCHMIDT ET AL.	
	Examiner	Art Unit	
	Alex B. Toy	3739	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1)☒ Responsive to communication(s) filed on *23 October 2003*.

2a)☐ This action is **FINAL**. 2b)☒ This action is non-final.

3)☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4)☒ Claim(s) *1-10* is/are pending in the application.

4a) Of the above claim(s) _____ is/are withdrawn from consideration.

5)☐ Claim(s) _____ is/are allowed.

6)☒ Claim(s) *1-10* is/are rejected.

7)☐ Claim(s) _____ is/are objected to.

8)☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9)☐ The specification is objected to by the Examiner.

10)☒ The drawing(s) filed on *23 October 2003* is/are: a)☒ accepted or b)☐ objected to by the Examiner.

Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).

11)☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12)☒ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

a)☒ All b)☐ Some * c)☐ None of:

1.☒ Certified copies of the priority documents have been received.

2.☒ Certified copies of the priority documents have been received in Application No. 10/691,995.

3.☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

1) ☒ Notice of References Cited (PTO-892)
2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
3) ☒ Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08) Paper No(s)/Mail Date *10/23/03*.
4) ☐ Interview Summary (PTO-413) Paper No(s)/Mail Date. _____ .
5) ☐ Notice of Informal Patent Application (PTO-152)
6) ☐ Other: _____.

DETAILED ACTION

Priority

Acknowledgment is made of applicant's claim for foreign priority under 35 U.S.C. 119(a)-(d). The certified copy has been received in this application – Application No. 10/691995, filed on October 23, 2003.

Claim Rejections - 35 USC § 112

The following is a quotation of the first paragraph of 35 U.S.C. 112:

> The specification shall contain a written description of the invention, and of the manner and process of making and using it, in such full, clear, concise, and exact terms as to enable any person skilled in the art to which it pertains, or with which it is most nearly connected, to make and use the same and shall set forth the best mode contemplated by the inventor of carrying out his invention.

Claim 6-10 are rejected under 35 U.S.C. 112, first paragraph, as failing to comply with the enablement requirement. The claims contain subject matter which was not described in the specification in such a way as to enable one skilled in the art to which it pertains, or with which it is most nearly connected, to make and/or use the invention. On page 11, line 10, claim 6 specifies that the middle part of the medical instrument includes pins. Said pins, however, are not disclosed in the specification; only pin mounts 15 are disclosed in the specification and Fig. 1B of the drawings. For the purposes of examination, it is assumed that said pins was intended to refer instead to said pin mounts 15.

The following is a quotation of the second paragraph of 35 U.S.C. 112:

> The specification shall conclude with one or more claims particularly pointing out and distinctly claiming the subject matter which the applicant regards as his invention.

Claims 1-10 are rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.

Regarding claims 1, 4, and 9, "plug-type" is recited as a limitation. However, the addition of the word "type" to an otherwise definite expression extends the scope of the expression so as to render it indefinite. Ex parte Copenhaver, 109 USPQ 118 (Bd. App. 1955).

Regarding claim 6, the limitation "said pins" is recited on page 11, line 19. The antecedent basis for this limitation is indefinite, as it is unclear whether "said pins" refers to the pins in the middle of the supply unit, the pins of one of the plugs, or the nonexistent pins that are claimed to be on the middle part of the medical instrument. Claim 6 also recites the limitation "said pin mounts" on page 11, line 19 through page 12, line 1. The antecedent basis for this limitation is also indefinite, as the only pin mounts previously recited belong to the plugs. For the purposes of examination, it is assumed that the applicant intended "said pins" to refer to the pins in the middle of the supply unit and "pins" on the middle part of the medical instrument to be "pin mounts."

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

> (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

The factual inquiries set forth in *Graham* **v.** *John Deere Co.*, 383 U.S. 1, 148 USPQ 459 (1966), that are applied for establishing a background for determining obviousness under 35 U.S.C. 103(a) are summarized as follows:

1. Determining the scope and contents of the prior art.
2. Ascertaining the differences between the prior art and the claims at issue.
3. Resolving the level of ordinary skill in the pertinent art.
4. Considering objective evidence present in the application indicating obviousness or nonobviousness.

Claims 1, 5-6, and 10 are rejected under 35 U.S.C. 103(a) as being unpatentable over Kummerfeld et al. (U.S. Pat. No. 5,113,897) in view of Saruya (U.S. PGPub 2004/0171913). Applicant cannot rely upon the foreign priority papers to overcome this rejection because a translation of said papers has not been made of record in accordance with 37 CFR 1.55. See MPEP § 201.15.

Regarding claim 1, Kummerfeld et al. disclose a supply unit for accommodating medical instruments, the supply unit comprising:

a height-adjustable middle part 3 (col. 5, ln. 14-18) with side cheeks 15 for engaging a middle part 41 of a medical instrument 30 with lateral guide surfaces 35 which are complementary to the side cheeks 15 (col. 6, ln. 18-23 and Figs. 1 and 2);

pins 16 arranged at the middle part of the supply unit and projecting upwardly (Fig. 1);

a power supply with a plug-type connection 7 (col. 5, ln. 21-24 and Fig. 1);

a data transmission facility with a plug-type connection 40 (col. 6, ln. 52-56 and Fig. 1);

a pneumatic supply with a plug-type connection 6 (col. 5, ln. 21-24 and Fig. 1);

end position sensors 18 provided at the middle part of the supply unit, said end position sensors sending a corresponding signal to an evaluating and control unit when the cheeks 15 of the height-adjustable middle part of the supply unit have been moved into contact with the lateral guide surfaces 35 of the medical instrument (col. 6, ln. 18-28). Then the user actuates the control pad 10 to raise the supply unit upward to the extent that said pins are completely accommodated by complementary and downwardly open pin mounts 37 at the middle part of the medical instrument (col. 6, ln. 28-33 and Figs. 1 and 2).

The claim differs from Kummerfeld et al. in calling for the signal to be sent when the height-adjustable middle part of the supply unit has been moved upward to the extent that said pins are completely accommodated by complementary and downwardly open pin mounts at the middle part of the medical instrument. Saruya, however, teaches a supply unit 3 and medical instrument 2 apparatus, wherein the signal is sent when the connection pins 45 and 46 are completely accommodated by complementary open pin mounts 47 and 48 to indicate that a proper full connection has been detected (pg. 8, ¶ 131 and Figs. 1-3 and 16).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have sent the signal of Kummerfeld et al. when the height-adjustable middle part of the supply unit has been moved upward to the extent that said pins are completely accommodated by complementary and downwardly open pin mounts in view of the teaching of Saruya in order to indicate that a proper full connection has been detected.

The claim also differs from Kummerfeld et al. in calling for the signal to cause the evaluating and control unit to release: said plug-type connection for said power supply, said plug-type connection for said data transmission facility, and said plug-type connection for said pneumatic supply. Saruya, however, also teaches that when the signal as previously described is sent, it causes the evaluating and control unit 10 to release the power supply 8, data transmission 11 and 12, and light source 9 of the supply unit through direct plug connections 19-20 and 33-34 (pgs. 8-9, ¶ 131-138 and Figs. 1-3 and 16).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the signal of Kummerfeld et al. cause the evaluating and control unit to release said plug-type connection for said power supply, said plug-type connection for said data transmission facility, and said plug-type connection for said pneumatic supply through direct plug connections in view of the teaching of Saruya in order to simultaneously connect and activate the supply unit and medical instrument apparatus.

Regarding claim 5, Kummerfeld et al. disclose a supply unit for accommodating medical instruments in accordance with claim 1 in view of Saruya. In addition, Kummerfeld et al. disclose that the supply unit 2 is ceiling-mounted (col. 5, ln. 24-26).

Regarding claim 6, Kummerfeld et al. disclose a medical instrument supply unit and medical instrument combination comprising:

a medical instrument 30 with a middle part 41 with lateral guide surfaces 35 and with pin mounts 37 (col. 6, ln. 31-33 and Fig. 2);

a supply unit with a height-adjustable middle part 3 (col. 5, ln. 14-18) with side surfaces 15 for engaging the medical instrument middle part 41 of a medical instrument 30, the side surfaces 15 being complementary to the lateral guide surfaces 35 of the medical instrument (col. 6, ln. 18-23 and Figs. 1 and 2) and with pins 16 arranged at the middle part of the supply unit and projecting upwardly (Fig. 1), a power supply with a power plug connection 7 with pins and pin mounts (col. 5, ln. 21-24 and Fig. 1), a data transmission plug connection 40 with pins and pin mounts (col. 6, ln. 52-56 and Fig. 1), a pneumatic supply with a pneumatic plug connection 6 with pins and pin mounts (col. 5, ln. 21-24 and Fig. 1) and end position sensors 18 provided at the middle part of the supply unit, said end position sensors sending a corresponding signal to an evaluating and control unit when the height-adjustable middle part of the supply unit has been moved into contact with the lateral guide surfaces 35 of the medical instrument (col. 6, ln. 18-28). Then the user actuates the control pad 10 to raise the supply unit upward to the extent that said pins are completely accommodated by complementary and downwardly open pin mounts 37 at the middle part of the medical instrument (col. 6, ln. 28-33 and Figs. 1 and 2).

The claim differs from Kummerfeld et al. in calling for the signal to be sent when the height-adjustable middle part of the supply unit has been moved upward to the extent that said pins are completely accommodated by said pin mounts. Saruya, however, teaches a supply unit 3 and medical instrument 2 apparatus, wherein the signal is sent when the connection pins 45 and 46 are completely accommodated by

complementary open pin mounts 47 and 48 to indicate that a proper full connection has been detected (pg. 8, ¶ 131 and Figs. 1-3 and 16).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have sent the signal of Kummerfeld et al. when the height-adjustable middle part of the supply unit has been moved upward to the extent that said pins are completely accommodated by said pin mounts in view of the teaching of Saruya in order to indicate that a proper full connection has been detected.

The claim also differs from Kummerfeld et al. in calling for the signal to cause the evaluating and control unit to activate said connection for said power supply, said connection for said data transmission, and said connection for said pneumatic supply. Saruya, however, also teaches that when the signal as previously described is sent, it causes the evaluating and control unit 10 to activate the power supply 8, data transmission 11 and 12, and light source 9 of the supply unit through direct plug connections 19-20 and 33-34 (pgs. 8-9, ¶ 131-138 and Figs. 1-3 and 16).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the signal of Kummerfeld et al. cause the evaluating and control unit to activate said connection for said power supply, said connection for said data transmission, and said connection for said pneumatic supply through direct plug connections in view of the teaching of Saruya in order to simultaneously connect and activate the supply unit and medical instrument apparatus.

Regarding claim 10, Kummerfeld et al. disclose a combination in accordance with claim 6 in view of Saruya. In addition, Kummerfeld et al. disclose that the supply unit 2 is ceiling-mounted (col. 5, ln. 24-26).

Claims 2 and 7 are rejected under 35 U.S.C. 103(a) as being unpatentable over Kummerfeld et al. in view of Saruya and further in view of Yabe (U.S. Pat. No. 4,402,313).

Regarding claim 2, Kummerfeld et al. disclose a supply unit for accommodating medical instruments in accordance with claim 1 in view of Saruya. In addition, Kummerfeld et al. disclose a pneumatic supply 6 that provides for the transfer of medical gases (col. 5, ln. 21-23 and Fig. 1). The claim differs from Kummerfeld et al. in view of Saruya in calling for the pneumatic supply to also provide for the generation of a vacuum. Yabe, however, teaches a supply unit 6 for accommodating medical instruments 1, wherein the pneumatic supply 39, 40, or 72 provides for the generation of a vacuum for removing fluid during a medical procedure (col. 4, ln. 50-54 and col. 6, ln. 39-43 and Figs. 1 and 5-6).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the pneumatic supply of Kummerfeld et al. in view of Saruya provide for the generation of a vacuum further in view of the teaching of Yabe to remove fluid during a medical procedure.

Regarding claim 7, Kummerfeld et al. disclose a combination in accordance with claim 6 in view of Saruya. In addition, Kummerfeld et al. disclose a pneumatic supply 6

that provides for the transfer of medical gases (col. 5, ln. 21-23 and Fig. 1). The claim differs from Kummerfeld et al. in view of Saruya in calling for the pneumatic supply to also provide for the generation of a vacuum. Yabe, however, teaches a supply unit 6 for accommodating medical instruments 1, wherein the pneumatic supply 39, 40, or 72 provides for the generation of a vacuum for removing fluid during a medical procedure (col. 4, ln. 50-54 and col. 6, ln. 39-43 and Figs. 1 and 5-6).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the pneumatic supply of Kummerfeld et al. in view of Saruya provide for the generation of a vacuum further in view of the teaching of Yabe to remove fluid during a medical procedure.

Claims 3 and 8 are rejected under 35 U.S.C. 103(a) as being unpatentable over Kummerfeld et al. in view of Saruya and further in view of Shafiyan-Rad et al. (U.S. Pat. No. 6,617,845 B1).

Regarding claim 3, Kummerfeld et al. disclose a supply unit for accommodating medical instruments in accordance with claim 1 in view of Saruya. In addition, Kummerfeld et al. disclose end position sensors 18 comprising electrical REED contacts (col. 5, ln. 51-57 and Fig. 1). The claim differs from Kummerfeld et al. in view of Saruya in calling for the end position sensors to comprise photoelectric cells. Shafiyan-Rad et al., however, teach that photoelectric proximity sensors for detecting the presence or

absence of an object are common and well-known in the sensor art and may be used for machine control.

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the end position sensors of Kummerfeld et al. in view of Saruya comprise photoelectric cells in view of the teaching of Shafiyan-Rad et al. that a photoelectric sensor is an obvious alternative type of proximity sensor that is well-known in the art.

Regarding claim 8, Kummerfeld et al. disclose a combination in accordance with claim 6 in view of Saruya. In addition, Kummerfeld et al. disclose end position sensors 18 comprising electrical REED contacts (col. 5, ln. 51-57 and Fig. 1). The claim differs from Kummerfeld et al. in view of Saruya in calling for the end position sensors to comprise photoelectric cells. Shafiyan-Rad et al., however, teach that photoelectric proximity sensors for detecting the presence or absence of an object are common and well-known in the sensor art and may be used for machine control.

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the end position sensors of Kummerfeld et al. in view of Saruya comprise photoelectric cells in view of the teaching of Shafiyan-Rad et al. that a photoelectric sensor is an obvious alternative type of proximity sensor that is well-known in the art.

Claims 4 and 9 are rejected under 35 U.S.C. 103(a) as being unpatentable over Kummerfeld et al. in view of Saruya and further in view of Drager et al. (U.S. Pat. No. 4,654,493).

Regarding claim 4, Kummerfeld et al. disclose a supply unit for accommodating medical instruments in accordance with claim 1 in view of Saruya. The claim differs from Kummerfeld et al. in view of Saruya in calling for said plug-type connection for said power supply to include power supply connection jacks with flaps as splash proofing for said power supply connection jacks, said connection for said data transmission facility to include transmission connection jacks with flaps as splash proofing for said transmission connection jacks, and said connection for said pneumatic supply to include pneumatic supply connection jacks with flaps as splash proofing for said pneumatic supply connection jacks.

Drager et al., however, teach flap 2 as splash proofing for a socket plug (col. 2, ln. 10-16 and Fig. 1). Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have included flaps to cover the plugs of Kummerfeld et al. in view of Saruya further in view of the teaching of Drager et al. in order to make them splash proof.

Regarding claim 9, Kummerfeld et al. disclose a combination in accordance with claim 6 in view of Saruya. The claim differs from Kummerfeld et al. in view of Saruya in calling for said plug-type connection for said power supply to include power supply connection jacks with flaps as splash proofing for said power supply connection jacks, said connection for said data transmission facility to include transmission connection

jacks with flaps as splash proofing for said transmission connection jacks, and said connection for said pneumatic supply to include pneumatic supply connection jacks with flaps as splash proofing for said pneumatic supply connection jacks.

Drager et al., however, teach flap 2 as splash proofing for a socket plug (col. 2, ln. 10-16 and Fig. 1). Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have included flaps to cover the plugs of Kummerfeld et al. in view of Saruya further in view of the teaching of Drager et al. in order to make them splash proof.

Claims 1-2, 5-7, and 10 are rejected under 35 U.S.C. 103(a) as being unpatentable over Kummerfeld et al. in view of Yabe.

Regarding claim 1, Kummerfeld et al. disclose a supply unit for accommodating medical instruments, the supply unit comprising:

a height-adjustable middle part 3 (col. 5, ln. 14-18) with side cheeks 15 for engaging a middle part 41 of a medical instrument 30 with lateral guide surfaces 35 which are complementary to the side cheeks 15 (col. 6, ln. 18-23 and Figs. 1 and 2);

pins 16 arranged at the middle part of the supply unit and projecting upwardly (Fig. 1);

a power supply with a plug-type connection 7 (col. 5, ln. 21-24 and Fig. 1);

a data transmission facility with a plug-type connection 40 (col. 6, ln. 52-56 and Fig. 1);

a pneumatic supply with a plug-type connection 6 (col. 5, ln. 21-24 and Fig. 1);

end position sensors 18 provided at the middle part of the supply unit, said end position sensors sending a corresponding signal to an evaluating and control unit when the cheeks 15 of the height-adjustable middle part of the supply unit have been moved into contact with the lateral guide surfaces 35 of the medical instrument (col. 6, ln. 18-28). Then the user actuates the control pad 10 to raise the supply unit upward to the extent that said pins are completely accommodated by complementary and downwardly open pin mounts 37 at the middle part of the medical instrument (col. 6, ln. 28-33 and Figs. 1 and 2).

The claim differs from Kummerfeld et al. in calling for the signal to be sent when the height-adjustable middle part of the supply unit has been moved upward to the extent that said pins are completely accommodated by complementary and downwardly open pin mounts at the middle part of the medical instrument. Yabe, however, teaches a supply unit 6 and medical instrument 1 apparatus, wherein the signal is sent when the connection pins 13 are completely accommodated by complementary open pin mounts 29 to indicate that a proper full connection has been detected (col. 3, ln. 66 – col. 4, ln. 20, Fig. 4, and Abstract.).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have sent the signal of Kummerfeld et al. when the height-adjustable middle part of the supply unit has been moved upward to the extent that said pins are completely accommodated by complementary and downwardly open pin mounts in view of the teaching of Yabe in order to indicate that a proper full connection has been detected.

The claim also differs from Kummerfeld et al. in calling for the signal to cause the evaluating and control unit to release: said plug-type connection for said power supply, said plug-type connection for said data transmission facility, and said plug-type connection for said pneumatic supply. Yabe, however, also teaches that when the signal as previously described is sent, it causes the evaluating and control unit to release the power supply, data transmission, air supply, fluid supply, and light source of the supply unit through direct plug connections 13 and 29, 39 and 40, 72, and 17 (col. 3, ln. 66 – col. 4, ln. 20; col. 4, ln. 50-54; col. 6, ln. 39-43; and Figs. 1 and 4-6).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the signal of Kummerfeld et al. cause the evaluating and control unit to release said plug-type connection for said power supply, said plug-type connection for said data transmission facility, and said plug-type connection for said pneumatic supply through direct plug connections in view of the teaching of Yabe in order to simultaneously connect and activate the supply unit and medical instrument apparatus.

Regarding claim 2, Kummerfeld et al. disclose a supply unit for accommodating medical instruments in accordance with claim 1 in view of Yabe. In addition, Kummerfeld et al. disclose a pneumatic supply 6 that provides for the transfer of medical gases (col. 5, ln. 21-23 and Fig. 1). The claim differs from Kummerfeld et al. in calling for the pneumatic supply to also provide for the generation of a vacuum. Yabe, however, also teaches a supply unit 6 for accommodating medical instruments 1, wherein the pneumatic supply 39, 40, or 72 provides for the generation of a vacuum for

removing fluid during a medical procedure (col. 4, ln. 50-54 and col. 6, ln. 39-43 and Figs. 1 and 5-6).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the pneumatic supply of Kummerfeld et al. in view of Yabe provide for the generation of a vacuum also in view of the teaching of Yabe to remove fluid during a medical procedure.

Regarding claim 5, Kummerfeld et al. disclose a supply unit for accommodating medical instruments in accordance with claim 1 in view of Yabe. In addition, Kummerfeld et al. disclose that the supply unit 2 is ceiling-mounted (col. 5, ln. 24-26).

Regarding claim 6, Kummerfeld et al. disclose a medical instrument supply unit and medical instrument combination comprising:

a medical instrument 30 with a middle part 41 with lateral guide surfaces 35 and with pin mounts 37 (col. 6, ln. 31-33 and Fig. 2);

a supply unit with a height-adjustable middle part 3 (col. 5, ln. 14-18) with side surfaces 15 for engaging the medical instrument middle part 41 of a medical instrument 30, the side surfaces 15 being complementary to the lateral guide surfaces 35 of the medical instrument (col. 6, ln. 18-23 and Figs. 1 and 2) and with pins 16 arranged at the middle part of the supply unit and projecting upwardly (Fig. 1), a power supply with a power plug connection 7 with pins and pin mounts (col. 5, ln. 21-24 and Fig. 1), a data transmission plug connection 40 with pins and pin mounts (col. 6, ln. 52-56 and Fig. 1), a pneumatic supply with a pneumatic plug connection 6 with pins and pin mounts (col. 5, ln. 21-24 and Fig. 1) and end position sensors 18 provided at the middle part of the

supply unit, said end position sensors sending a corresponding signal to an evaluating and control unit when the height-adjustable middle part of the supply unit has been moved into contact with the lateral guide surfaces 35 of the medical instrument (col. 6, ln. 18-28). Then the user actuates the control pad 10 to raise the supply unit upward to the extent that said pins are completely accommodated by complementary and downwardly open pin mounts 37 at the middle part of the medical instrument (col. 6, ln. 28-33 and Figs. 1 and 2).

The claim differs from Kummerfeld et al. in calling for the signal to be sent when the height-adjustable middle part of the supply unit has been moved upward to the extent that said pins are completely accommodated by said pin mounts. Yabe, however, teaches a supply unit 6 and medical instrument 1 apparatus, wherein the signal is sent when the connection pins 13 are completely accommodated by said pin mounts 29 to indicate that a proper full connection has been detected (col. 3, ln. 66 – col. 4, ln. 20, Fig. 4, and Abstract.).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have sent the signal of Kummerfeld et al. when the height-adjustable middle part of the supply unit has been moved upward to the extent that said pins are completely accommodated by said pin mounts in view of the teaching of Yabe in order to indicate that a proper full connection has been detected.

The claim also differs from Kummerfeld et al. in calling for the signal to cause the evaluating and control unit to activate said connection for said power supply, said connection for said data transmission, and said connection for said pneumatic supply.

Yabe, however, also teaches that when the signal as previously described is sent, it causes the evaluating and control unit to activate the power supply, data transmission, air supply, fluid supply, and light source of the supply unit through direct plug connections 13 and 29, 39 and 40, 72, and 17 (col. 3, ln. 66 – col. 4, ln. 20; col. 4, ln. 50-54; col. 6, ln. 39-43; and Figs. 1 and 4-6).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the signal of Kummerfeld et al. cause the evaluating and control unit to release said plug-type connection for said power supply, said plug-type connection for said data transmission facility, and said plug-type connection for said pneumatic supply through direct plug connections in view of the teaching of Yabe in order to simultaneously connect and activate the supply unit and medical instrument apparatus.

Regarding claim 7, Kummerfeld et al. disclose a combination in accordance with claim 6 in view of Yabe. In addition, Kummerfeld et al. disclose a pneumatic supply 6 that provides for the transfer of medical gases (col. 5, ln. 21-23 and Fig. 1). The claim differs from Kummerfeld et al. in calling for the pneumatic supply to also provide for the generation of a vacuum. Yabe, however, teaches a supply unit 6 for accommodating medical instruments 1, wherein the pneumatic supply 39, 40, or 72 provides for the generation of a vacuum for removing fluid during a medical procedure (col. 4, ln. 50-54 and col. 6, ln. 39-43 and Figs. 1 and 5-6).

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the pneumatic supply of Kummerfeld et al. in view

of Yabe provide for the generation of a vacuum also in view of the teaching of Yabe to remove fluid during a medical procedure.

Regarding claim 10, Kummerfeld et al. disclose a combination in accordance with claim 6 in view of Yabe. In addition, Kummerfeld et al. disclose that the supply unit 2 is ceiling-mounted (col. 5, ln. 24-26).

Claims 3 and 8 are rejected under 35 U.S.C. 103(a) as being unpatentable over Kummerfeld et al. in view of Yabe and further in view of Shafiyan-Rad et al.

Regarding claim 3, Kummerfeld et al. disclose a supply unit for accommodating medical instruments in accordance with claim 1 in view of Yabe. In addition, Kummerfeld et al. disclose end position sensors 18 comprising electrical REED contacts (col. 5, ln. 51-57 and Fig. 1). The claim differs from Kummerfeld et al. in view of Yabe in calling for the end position sensors to comprise photoelectric cells. Shafiyan-Rad et al., however, teach that photoelectric proximity sensors for detecting the presence or absence of an object are common and well-known in the sensor art and may be used for machine control.

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the end position sensors of Kummerfeld et al. in view of Yabe comprise photoelectric cells in view of the teaching of Shafiyan-Rad et al. that a photoelectric sensor is an obvious alternative type of proximity sensor that is well-known in the art.

Regarding claim 8, Kummerfeld et al. disclose a combination in accordance with claim 6 in view of Yabe. In addition, Kummerfeld et al. disclose end position sensors 18 comprising electrical REED contacts (col. 5, ln. 51-57 and Fig. 1). The claim differs from Kummerfeld et al. in view of Yabe in calling for the end position sensors to comprise photoelectric cells. Shafiyan-Rad et al., however, teach that photoelectric proximity sensors for detecting the presence or absence of an object are common and well-known in the sensor art and may be used for machine control.

Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have the end position sensors of Kummerfeld et al. in view of Yabe comprise photoelectric cells in view of the teaching of Shafiyan-Rad et al. that a photoelectric sensor is an obvious alternative type of proximity sensor that is well-known in the art.

Claims 4 and 9 are rejected under 35 U.S.C. 103(a) as being unpatentable over Kummerfeld et al. in view of Yabe and further in view of Drager et al.

Regarding claim 4, Kummerfeld et al. disclose a supply unit for accommodating medical instruments in accordance with claim 1 in view of Yabe. The claim differs from Kummerfeld et al. in view of Yabe in calling for said plug-type connection for said power supply to include power supply connection jacks with flaps as splash proofing for said power supply connection jacks, said connection for said data transmission facility to include transmission connection jacks with flaps as splash proofing for said transmission connection jacks, and said connection for said pneumatic supply to include

pneumatic supply connection jacks with flaps as splash proofing for said pneumatic supply connection jacks.

Drager et al., however, teach flap 2 as splash proofing for a socket plug (col. 2, ln. 10-16 and Fig. 1). Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have included flaps to cover the plugs of Kummerfeld et al. in view of Yabe further in view of the teaching of Drager et al. in order to make them splash proof.

Regarding claim 9, Kummerfeld et al. disclose a combination in accordance with claim 6 in view of Yabe. The claim differs from Kummerfeld et al. in view of Yabe in calling for said plug-type connection for said power supply to include power supply connection jacks with flaps as splash proofing for said power supply connection jacks, said connection for said data transmission facility to include transmission connection jacks with flaps as splash proofing for said transmission connection jacks, and said connection for said pneumatic supply to include pneumatic supply connection jacks with flaps as splash proofing for said pneumatic supply connection jacks.

Drager et al., however, teach flap 2 as splash proofing for a socket plug (col. 2, ln. 10-16 and Fig. 1). Therefore, it would have been obvious to one of ordinary skill in the art at the time the invention was made to have included flaps to cover the plugs of Kummerfeld et al. in view of Yabe further in view of the teaching of Drager et al. in order to make them splash proof.

Conclusion

The prior art made of record and not relied upon is considered pertinent to applicant's disclosure:

U.S. Pat. No. 4,708,126 to Toda et al.
U.S. Pat. No. 4,883,558 to Bellis et al.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Alex B. Toy whose telephone number is (571) 272-1953. The examiner can normally be reached on Monday through Friday, 8:00 AM to 4:30 PM.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Linda C.M. Dvorak can be reached on (571) 272-4764. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

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9/12/05

MICHAEL PEFFLEY
PRIMARY EXAMINER